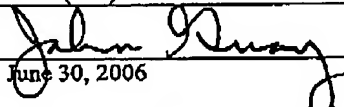
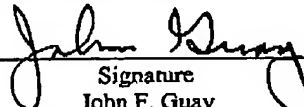


JUN 30 2006

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/055,189
		Filing Date	January 25, 2002
		First Named Inventor	Sarah E. Campbell et al.
		Group Art Unit	2625
		Examiner Name	Yixing Qin
Total Number of Pages in This Submission	16	Attorney Docket Number	D/A1496 (1508/3550)

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request (\$____) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement (\$____) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Notice to File Missing Parts/ Incomplete Application (\$____) <input type="checkbox"/> A copy of the Notice to File Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition (\$____) <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer (\$____) <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (\$____) (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> Check in the amount of \$_____ <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 24-0037 for the above identified docket number.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	John F. Guay - Registration No. 47,248 c/o Gunnar G. Leinberg, Esq. Nixon Peabody LLP Clinton Square, P.O. Box 31051 Rochester, New York 14603-1051 Telephone: (585) 263-1014 Fax: (585) 263-1600
Signature	
Date	June 30, 2006

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<input checked="" type="checkbox"/> transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at 571-273-8300.	
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants	:	Sarah E. Campbell, Ken Hayward, and Marc J. Krolczyk)	Examiner:
)	Yixing Qin
)	
Serial No.	:	10/055,189)	Art Unit:
)	2625
Cnfrm. No.	:	9199)	
)	
Filed	:	January 25, 2002)	
)	
For	:	A METHOD AND SYSTEM FOR SHOPPING FOR A CONSUMABLE FOR A DEVICE)	
)	

AMENDMENT AFTER FINAL REJECTION

MAIL STOP AF

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the April 20, 2006, final office action, please amend the above-identified application as follows:

Amendments to the Claims begin on page 2 of this paper.

Remarks begin on page 9 of this paper.